

NOV 14 2006

Client Reference No.: W1623/01EI
PTO/SB/21 (07-06)TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

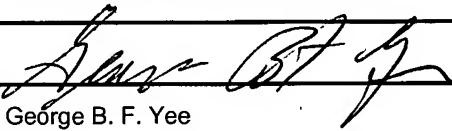
Total Number of Pages in This Submission

Application Number	10/828,881
Filing Date	April 20, 2004
First Named Inventor	INNAN, Masataka
Art Unit	2627
Examiner Name	Tan X. Dinh
Total Number of Pages in This Submission	2
Attorney Docket Number	16869S-114300US

ENCLOSURES (Check all that apply)

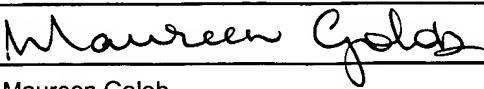
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Communication; Return Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
	<input type="checkbox"/> CD, Number of CD(s) _____	
	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

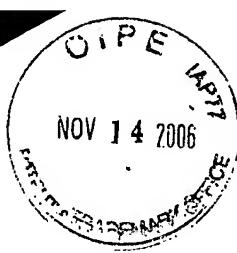
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	George B. F. Yee		
Date	November 8, 2006	Reg. No.	37,478

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature	
Typed or printed name	Maureen Golob
Date	November 8, 2006



I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:
Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

On November 8, 2006

TOWNSEND and TOWNSEND and CREW LLP

By: Maureen Golob
Maureen Golob

PATENT

Attorney Docket No. 16869S-114300US
Client Reference No. W1623-01EI

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Masataka INNAN *et al.*

Application No.: 10/828,881

Filed: April 20, 2004

For: STORAGE SYSTEM AND
CONTROLLING METHOD THEREOF,
AND DEVICE AND RECORDING
MEDIUM IN STORAGE SYSTEM

Customer No. 20350

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sirs:

Upon reviewing the Notice of Allowance mailed October 18, 2006, it was noted that the form PTOL-37 incorrectly identified the allowable claims to be 12, apparently a typographical error. As the examiner correctly notes on page 2, the allowed claims are 1-12. The undersigned respectfully requests any corrective action that may be required.

Respectfully submitted,



George B. F. Yee
Reg. No. 37,478

TOWNSEND and TOWNSEND and CREW LLP

Two Embarcadero Center, Eighth Floor

San Francisco, California 94111-3834

Tel: (650) 326-2400

Fax: (415) 576-0300

GBFY:mg